FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

04027002

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
FORM LIMITED OFFERING FYEMP

1288455

OMB Approval

OMB Number: 3235-0076 Expires: May 31,

May 31, 2005

Estimated average burden hours per response . . .16.00

Prefix Serial
DATE RECEIVED

UNIFO	ORM LIMITED OFFERING EXEMPTION	N	
Name of Offering (☐ check if this is a Membership Units	an amendment and name has changed, and in	dicate change.)	
Filing Under (Check box(es) that apply Type of Filing: [X]New Filing A		NA PALLE	
	A. BASIC IDENTIFICATION DA	TA A	- INED CO
 Enter the information requested abo 			
Name of issuer (check if this is an a OnTrack Sports LLC	amendment and name has changed, and indic	cate change.)	* Z 2004
Address of Executive Offices (Number 775 Summit Drive, Deerfield, IL 6001)	• • •	Telephone Number (Including (847) 948-1225	
Address of Principal Business Operation (if different from Executive Offices) N	ons (Number and Street, City, State, Zip Cod	de Telephone Number (Including)	Área Code)
Brief Description of Business: Sale of	adjustable length junior golf clubs.		
Type of Business Organization			
	☐ limited partnership, already formed	[X] other (please speci	• •
☐ business trust	☐ limited partnership, to be formed	Limited Liability Comp	
	Month Y	<i>Y</i> ear	PROCESSE
Actual or Estimated Date of Incorporation	on or Organization: [06]	[2001] [X] Actual Estimated	
Jurisdiction of Incorporation or Organi	ization: (Enter two-letter U.S. Postal Service CN for Canada; FN for other foreign ju	e abbreviation for State;	APR 26 2004
GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering U.S.C. 77d(6).	g of securities in reliance on an exemption under Regu	alation D or Section 4(6), 17 CFR 230.507	THOMSON FINANCIAL t seq. or 15
and Exchange Commission (SEC) on the earlier which it is due, on the date it was mailed by Uni	than 15 days after the first sale of securities in the offer of the date it is receive by the SEC at the address givited States registered or certified mail to that address ommission, 450 Fifth Street, N.W., Washington, D.C. 2	en below or, if received at that address after	
where to rite: 0.5. Securities and Exchange Co	ommission, 430 rum succi, N. W., wasnington, D.C. A	∠ ∪J+7	

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a current valid OMB control number.

W

A. BASIC IDENTIFICATION DATA	
 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote of dispositi class of equity securities of the issuer; Each executive officer and director of the corporate issuers and of corporate general and partnership issuers; and Each general and managing partner of partnership issuers. 	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner [X] Executive Officer ☐ Director	[X] General and/or Managing Partner
Full Name (Last name first, if individual) Hutsell, Jeffrey Residence Address (Number and Street, City, Zin, Code)	
Business or Residence Address (Number and Street, City, Zip Code) 775 Summit Drive, Deerfield, IL 60015	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner [X] Executive Officer ☐ Director	[X] General and/or Managing Partner
Full Name (Last name first, if individual) Taylor, Neill	
Business or Residence Address (Number and Street, City, Zip Code) 0030 Bear Creek Lane, Redstone, CO 81623	
Check Box(es) that Apply: ☐ Promoter [X] Beneficial Owner [X] Executive Officer ☐ Director	[X] General and/or Managing Partner
Full Name (Last name first, if individual) Rutter, Rick	
Business or Residence Address (Number and Street, City, Zip Code) 11221 Rosewood, Leawood, KS 66211	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner [X] Executive Officer ☐ Director	[X] General and/or Managing Partner
Full Name (Last name first, if individual) Hoxworth, Darrell	
Business or Residence Address (Number and Street, City, Zip Code) 14710 England, Overland Park, KS 66221	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	[X] General and/or Managing Partner
Full Name (Last name first, if individual) Vadersen, Ernest	
Business or Residence Address (Number and Street, City, Zip Code) 132 Deer Haven Drive, Ponte Verde Beach, FL 32081	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	[X] General and/or Managing Partner
Full Name (Last name first, if individual) McKnight, Scott	
Business or Residence Address (Number and Street, City, Zip Code) 1497 Hemlock, Liberty, MO 64068	

Taylor & Hutsell Enterprises, LLC

Business or Residence Address (Number and Street, City, Zip Code)
0030 Bear Creek Lane, Redstone, CO 81623

Full Name (Last name first, if individual)

Check Box(es) that Apply: ☐ Promoter [X] Beneficial Owner ☐ Executive Officer ☐ Director

☐ General and/or Managing Partner

Check Box(es) that Apply: ☐ Promoter [X] Beneficial Owner ☐ Executive Officer ☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)	
Accu-Length, LLC	
Business or Residence Address (Number and Street, City, Zip Code)	
11221 Rosewood, Leawood, KS 66211	

					B. INF	ORMAT	rion Al	BOUT C	FERI	NG.				
1. Has	the issu	er sold or	does the		tend to se								Yes □	No [X]
2. Wha	at is the	minimum	investme	ent that w	ill be acc	epted fro	om any in	dividual?	•				\$ 20,0	
3. Doe	s the off	fering per	mit joint (ownershi	p of a sin	gle unit?							Yes [X]	No
simi an a or d info	lar remussociate ealer. If rmation	ineration d person of f more that for that b	for solicit or agent o an five (5) roker or o	ation of f a broke persons lealer on	purchase er or deale to be list	rs in com er registe	nection w	ith sales of the SEC a	of securit and/or wi	ies in the th a state	offering. or states,	ectly, any com If a person to, Iist the name on the course ou may set fort	be listed of the br	d is
Full Na	me (Las	t name fi	rst, if indi	vidual)										
Busines	ss or Res	sidence A	ddress (N	lumber a	nd Street,	, City, St	ate, Zip C	Code)						
Name	of Asso	ciated Br	oker or D	ealer				<u>. </u>				<u></u>		
			Listed Has heck indiv [AR] [KS] [NH]			CT] [ME] [NY]	Icit Purc	hasers [DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	All States [ID] [MO] [PA]		
[RI]	(SC) ime (Las	[SD] st name fi	[TN] rst, if indi	(TX)	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
			ddress (N		nd Street	. City. St	ate. Zin (Code)						
			ker or De	_										
			Listed Has			nds to So	licit Purc	hasers			r	7 All C4-4		
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	heck indiv [AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	{CT} [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	All States [ID] [MO] [PA] [PR]		
Full N	ame (L	ast name	first, if	individu	al)		******		·			<u> </u>		
Rusin	acc or D	esidones	Address	Numb	or and C	tract C	ity State	Zin Co	de)					
				_ `	er and S	nieci, C	ny, state	, Zip Co						
Name	of Asso	ociated B	roker or	Dealer										
			n Listed				to Solic	it Purcha	asers					
•			r check is		,	,					□	All States		
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	(CO) [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering,

Type of Security	(Aggregat Offering Pr		An	ount Already Sold
Debt	\$	0		\$	0
Equity	\$	2,400,000	0	\$	210,000
[X] Common					
Convertible Securities (including warrants)	\$	0		\$	0
Partnership Interests		0		\$	0
Other (Specify)	\$	0		\$. 0
Total	\$ <u> </u>	2,400,000	00	\$	210,000
Answer also in Appendix, Column 3, if filing under U.	LOE				
Enter the number of accredited and non-accredited investors who have purch offering and the aggregate dollar amounts of their purchases. For offeri indicate the number of persons who have purchased securities and the aggregate their purchases on the total lines. Enter "0" if answer is "none" or "zero."	ngs under Rule 504,				
		Number Investor			Aggregate ollar Amount of Purchases
Accredited Investors		4		\$	210,000
Non-accredited Investors		0		\$	0
T +1 (C C C -1 D + 504 - 1)					
Lotal for filings under Kule 504 only)				\$	
Total (for filings under Rule 504 only)	tion requested for all		·- <u></u>	\$	
Answer also in Appendix, Column 4, if filing under ULOE	tion requested for all ne twelve (12) months	Type of		·	ollar Amount
Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the informat securities sold by the issuer, to date, in offerings of the types indicated, in the prior to the first sale of securities in this offering. Classify securities by Question 1. Type of offering	tion requested for all ne twelve (12) months type listed in Part C-	Type of Security		D	Sold
Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the informat securities sold by the issuer, to date, in offerings of the types indicated, in the prior to the first sale of securities in this offering. Classify securities by Question 1. Type of offering Rule 505	tion requested for all ne twelve (12) months type listed in Part C-			D \$	Sold
Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the informat securities sold by the issuer, to date, in offerings of the types indicated, in the prior to the first sale of securities in this offering. Classify securities by Question 1. Type of offering Rule 505	tion requested for all the twelve (12) months type listed in Part C-			D \$	Sold
Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the informat securities sold by the issuer, to date, in offerings of the types indicated, in the prior to the first sale of securities in this offering. Classify securities by Question 1. Type of offering Rule 505 Regulation A Rule 504	tion requested for all twelve (12) months type listed in Part C-			D \$	
Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the informal securities sold by the issuer, to date, in offerings of the types indicated, in the prior to the first sale of securities in this offering. Classify securities by Question 1. Type of offering Rule 505 Regulation A Rule 504 Total	tion requested for all the twelve (12) months type listed in Part C-			D \$	Sold
Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the informal securities sold by the issuer, to date, in offerings of the types indicated, in the prior to the first sale of securities in this offering. Classify securities by Question 1. Type of offering Rule 505 Regulation A Rule 504 Total	tion requested for all ne twelve (12) months type listed in Part C-			D \$	Sold
Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the informat securities sold by the issuer, to date, in offerings of the types indicated, in the prior to the first sale of securities in this offering. Classify securities by Question 1. Type of offering Rule 505 Regulation A Rule 504 Total Total Total Total Total Total Total Republic in this offering. Exclude amounts relating solely to organization in this offering may be given as subject to future contingencies. expenditure is not known, furnish an estimate and check the box to the left	tion requested for all the twelve (12) months type listed in Part C- and distribution of the ation expenses of the fifthe amount of an of the estimate.	Security		D \$	Sold
Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the informat securities sold by the issuer, to date, in offerings of the types indicated, in the prior to the first sale of securities in this offering. Classify securities by Question 1. Type of offering Rule 505 Regulation A Rule 504 Total Total a. Furnish a statement of all expenses in connection with the issuance ar securities in this offering. Exclude amounts relating solely to organization issuer. The information may be given as subject to future contingencies.	tion requested for all the twelve (12) months type listed in Part C- and distribution of the ation expenses of the stribution of the estimate.	Security		D \$	Sold
Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the informal securities sold by the issuer, to date, in offerings of the types indicated, in the prior to the first sale of securities in this offering. Classify securities by Question 1. Type of offering Rule 505	tion requested for all the twelve (12) months type listed in Part C- and distribution of the ation expenses of the lifthe amount of an of the estimate.	Security		D \$ \$ \$ \$	Sold
Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the informal securities sold by the issuer, to date, in offerings of the types indicated, in the prior to the first sale of securities in this offering. Classify securities by Question 1. Type of offering Rule 505	tion requested for all the twelve (12) months type listed in Part C- and distribution of the ation expenses of the If the amount of an of the estimate.	Security		D \$ \$ \$ \$	Sold 2,300
Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the informat securities sold by the issuer, to date, in offerings of the types indicated, in the prior to the first sale of securities in this offering. Classify securities by Question 1. Type of offering Rule 505 Regulation A Rule 504 Total Total a. Furnish a statement of all expenses in connection with the issuance ar securities in this offering. Exclude amounts relating solely to organizatissuer. The information may be given as subject to future contingencies expenditure is not known, furnish an estimate and check the box to the left Transfer Agent's Fees. Printing and Engraving Costs Legal Fees. Accounting Fees.	tion requested for all the twelve (12) months type listed in Part C-	Security		S	Sold 2,300
Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the informal securities sold by the issuer, to date, in offerings of the types indicated, in the prior to the first sale of securities in this offering. Classify securities by Question 1. Type of offering Rule 505 Regulation A Rule 504 Total Total a. Furnish a statement of all expenses in connection with the issuance ar securities in this offering. Exclude amounts relating solely to organization issuer. The information may be given as subject to future contingencies expenditure is not known, furnish an estimate and check the box to the left Transfer Agent's Fees. Printing and Engraving Costs Legal Fees Engineering Fees Engineering Fees	tion requested for all the twelve (12) months type listed in Part C-	Security	(x) (x) (x)	S	Sold 2,300
Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the informat securities sold by the issuer, to date, in offerings of the types indicated, in the prior to the first sale of securities in this offering. Classify securities by Question 1. Type of offering Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance ar securities in this offering. Exclude amounts relating solely to organization issuer. The information may be given as subject to future contingencies expenditure is not known, furnish an estimate and check the box to the left. Transfer Agent's Fees. Printing and Engraving Costs Legal Fees. Accounting Fees.	tion requested for all the twelve (12) months type listed in Part C- and distribution of the ation expenses of the amount of an of the estimate.	Security	(X) (X) (X) (X)	S	Sold 2,300

b. Enter the difference between the aggrega and total expenses furnished in response to proceeds to the issuer."	Part C-Question 4.a. This difference is the '	'adjusted gross	\$_2,372,700
5. Indicate below the amount of the adjusted used for each of the purposes shown. If the a estimate and check the box to the left of the estimation adjusted gross proceeds to the issuer set forth in	nate. The total of the payments listed must	h an	
		Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and Fees		🗅 \$	□ \$
Purchase of real estate		🗆 \$	□ \$
Purchase, rental or leasing and installat	ion of machinery and equipment	□ \$	[X] \$
Construction or leasing of plant buildin	gs and facilities	🗆 \$	□ \$
offering that may be used in exchange f	ing the value of securities involved in this for the assets or securities of another issuer		□ s
Repayment of indebtedness		🗆 \$	□ \$
Working capital		🗆 \$	[X] \$ <u>2,372,700</u>
• •			
			□ \$
Column Totals		\$	[X] \$ <u>2,372,700</u>
Total Payments Listed (column totals a	dded)	[X] \$	2,372,700
	D. FEDERAL SIGNATURE		
The issuer has duly caused this notice to be si following signature constitutes an undertaking of its staff, the information furnished by the is	g by the issuer to furnish to the U.S. Securit	ies and Exchange Commission	n, upon written request
Issuer (Print or Type) OnTrack Sports LLC	Signature Manual	Date 4/20/0	y
Name of Signor (Print or Type) Jeffrey A Hutsell	Title of Signer (Print or Type) Manager		
	ATTENTION		

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE
1.	disqualification provisions of su	R 230.252(c), (d), (e) or (f) presently subject to any of the Yes No ch rule?
2.		indertakes to furnish to any state administrator of any state in which this notice is filed, a notice on th times as required by state law.
3.	The undersigned issuer hereby uses issuer to offerees.	ndertakes to furnish to the state administrators, upon written request, information furnished by the
4.	Limited Offering exemption (UI	ts that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform LOE) of the state in which this notice is filed and understands that the issuer claiming the s the burden of establishing that these conditions have been satisfied.
	e issuer has read this notification a dersigned duly authorized person.	and knows the contents to be true and has duly caused this notice to be signed on its behalf by the
	er (Print or Type) rack Sports LLC	Signature Walk Date 4/20/04
Nam	e of Signor (Print or Type)	Title of Signer (Print or Type)

Manager

Instruction:

Jeffrey A. Hutsell

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2		3			4		5	;]
	Intend to non-acci investo Sta (Part B-	redited ors in te	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non Accredited Investors	Amount	Yes	No
AL		 							
AK		ļ ———				-			
AZ									
AR							·		
CA									
СО									
CT									
DE									
DC									
FL					_				
GA									
HI									
ID									
IL									
IN									
IA									
KS		X	Units @ \$10,000 per	3	\$110,000	0	0		
KY									
LA									
ME								ļ	
MD	ļ <u></u>			-					<u> </u>
MA		<u> </u>						ļ	<u> </u>
MI									
MN						ļ			
MS		ļ						<u> </u>	
МО		X	Units @ \$10,000 per	1	\$100,000	0	0		

APPENDIX

1	2	2 3 4				5			
	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disquali under ULOE atts explana waiver g (Part E-	State (if yes, ich ition of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Nonaccredited Investors	Amount	Yes	No
MT									
NE		1		 					
NV									
NH									
NJ									
NM									
NY									
NC									
ND									
ОН									
ок									
OR									
PA						_			
RI									
sc									
SD									
TN									
TX									
UT		<u> </u>							
VT									
VA									
WA									
WV									
WI									
WY									
PR					of 8		<u></u>		